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**DECLARATION FOR UTILITY OR PCT
DESIGN
PATENT APPLICATION JAN 31 2005
(37 CFR 1.63)**

Declaration Submitted With Initial Filing

OR

Declaration Submitted after Initial Filing (surcharge (37 CFR 1.16 (e)) required)



Attorney Docket Number	054030-0045
First Named Inventor	MOSS, Richard L. et al.
COMPLETE IF KNOWN	
Application Number	10/748,354
Filing Date	12/30/2003
Art Unit	Not known yet
Examiner Name	Not known yet

I hereby declare that:

Each inventor's residence, mailing address, and citizenship are as stated below next to their name.

I believe the inventor(s) named below to be the original and first inventor(s) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

TRANSGENIC MODEL FOR MYOCARDIAL FUNCTION

(Title of the Invention)

the specification of which

 is attached hereto

OR

was filed on (MM/DD/YYYY) 12/30/2003 as United States Application Number or PCT International

Application Number 10/748,354 and was amended on (MM/DD/YYYY) N/A (if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or (f), or 365(b) of any foreign application(s) for patent, inventor's or plant breeder's rights certificate(s), or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent, inventor's or plant breeder's rights certificate(s), or any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached? Yes	Certified Copy Attached? No
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

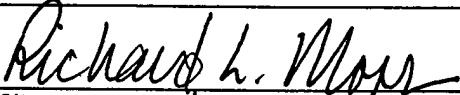
 Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

[Page 1 of 2]

This collection of information is required by 35 U.S.C. 115 and 37 CFR 1.63. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 21 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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DECLARATION — Utility or Design Patent Application

Direct all correspondence to: <input checked="" type="checkbox"/> Customer Number: 31096 OR <input type="checkbox"/> Correspondence address below			
Name			
Address			
City		State ZIP	
Country		Telephone Fax	
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.			
NAME OF SOLE OR FIRST INVENTOR:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any]) Richard L.		Family Name or Surname Moss	
Inventor's Signature 			Date 1/21/05
Residence: City Middleton	State Wisconsin	Country U.S.A.	Citizenship U.S.A.
Mailing Address 1326 Boundary Road			
City Middleton	State Wisconsin	ZIP 53562	Country U.S.A.
NAME OF SECOND INVENTOR:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any]) Jose A.A.		Family Name or Surname De Santana Pereira	
Inventor's Signature			Date
Residence: City Madison	State Wisconsin	Country U.S.A.	Citizenship Portugal
Mailing Address 311 North Hancock Street			
City Madison	State Wisconsin	ZIP 53703	Country U.S.A.
<input type="checkbox"/> Additional inventors or a legal representative are being named on the _____ supplemental sheet(s) PTO/SB/02A or 02LR attached hereto.			

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DECLARATION**LEGAL REPRESENTATIVES (35 U.S.C. 117)****Supplemental Sheet**Page 1 of 1

Name of Legal Representative:		<input type="checkbox"/> A petition has been filed for this non-signing legal representative		
Given Name (first and middle (if any)) <i>BRUNO</i>		Family Name or Surname <i>Sousa</i>		
Legal Representative's Signature <i>Bruno Sousa</i>		As Legal Representative for Jose A.A. De Santana		Date <u>01/18/2005</u>
Residence: City <i>ORLANDO</i>	State <i>FL</i>	Country <i>ORANGE</i>	Citizenship <i>PORTUGAL</i>	
Mailing Address <u>2849 Madison Pointe Cir</u>				
Mailing Address <u>#202</u>				
City <u>ORLANDO</u>	State <u>FL</u>	Zip <u>32821</u>	Country <u>USA</u>	
Name of Additional Legal Representative, if any:				
Given Name (first and middle (if any))		Family Name or Surname		
Legal Representative's Signature				
Residence: City	State	Country	Citizenship	
Mailing Address				
Mailing Address				
City	State	Zip	Country	
Name of Additional Legal Representative, if any:				
Given Name (first and middle (if any))		Family Name or Surname		
Legal Representative's Signature				
Residence: City	State	Country	Citizenship	
Mailing Address				
Mailing Address				
City	State	Zip	Country	

This collection of information is required by 35 U.S.C. 117 and 37 CFR 1.42, 1.43, 1.63 and 1.64(b). The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 21 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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